|  |  |   |                                       |                               |                                 |   |          |             | Application or Docket Number |                               |          |                     |            |                  |  |
|--|--|---|---------------------------------------|-------------------------------|---------------------------------|---|----------|-------------|------------------------------|-------------------------------|----------|---------------------|------------|------------------|--|
| PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003  |  |   |                                       |                               |                                 |   |          |             |                              | 10635 901                     |          |                     |            |                  |  |
|  |  | PART (                                    | (Column 2)                            |                               |                                 | SMALL ENTITY TYPE                             |          |             | OR                           | OTHER THAN<br>OR SMALL ENTITY |          |                     |            |                  |  |
| TOTAL CLAIMS   |  |   |                                       |                               |                                 |   |          | RAT         | E                            | FEE                           |          | RATE                | FEE        |                  |  |
| FOR  |  |   | NUMBER FILED                          |                               | NUMBER EXTRA                    |   | 8        | BASIC FEE   |                              | 385.00                        | OR       | BASIC FEE 770.0     |            | )0               |  |
| TOTAL CHARGEABLE CLAIMS  |  |   | /2 minus 20=                          |                               | · 0                             |   |          | X\$ 9=      |                              |                               | OR       | X\$18= 0            |            |                  |  |
| INDEPENDENT CLAIMS   |  |   | 6 minus 3 =                           |                               | * 3                             |   |          | X43=        |                              |                               | OR       | X86=                | X<br>B     |                  |  |
| MU   | LTIPLE DEPEN                                   | DENT CLAIM PR                             | RESENT                                |                               |                                 |   |          | +145=       |                              |                               | OR       | +290= &             |            |                  |  |
| * If   | the difference                                 | in column 1 is l                          | less than zero, enter "0" in column : |                               |                                 | column 2                                      |          | TOTAL       |                              |                               | OR       | TOTAL               | 102        | 8                |  |
| CLAIMS AS AMENDED - PART II  |  |   |                                       |                               |                                 |   |          |             |                              |                               |          | OTHER               |            |                  |  |
| (Column 1) (Column 2) (Column 3)   |  |   |                                       |                               |                                 |   | <u>,</u> | SMA         | LL E                         | ENTITY                        | OR       | SMALL               |            |                  |  |
| AMENDMENTA   | 2/24/04  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                       | HIGH<br>NUM<br>PREVIO<br>PAID | BER<br>OUSLY                    | PRESENT<br>EXTRA                              |          | RAT         | E                            | ADDI-<br>TIONAL<br>FEE        |          | RATE                | TION<br>FE | IAL              |  |
|  | Total  |   | Minus                                 | ** 2                          | 0                               | =   |          | X\$ 9       | )=                           |                               | OR       | X\$18=              |            |                  |  |
|  | Ind pendent                                    | • 7                                       | Minus                                 | ***                           | 6                               | =   |          | X43         | =                            |                               | OR       | X86=                | 86.0       | 10               |  |
| 1 -  | FIRST PRESE                                    | FIRST PRESENTATION OF MULTIPLE DEPENDEN   |                                       | T CLAIM                       |                                 | ړ   | +145     | ·-          |                              | OR                            | +290=    |                     |            |                  |  |
| Extra payment of \$7000 which the client did not need -<br>for extra dependent clarons.  |  |   |                                       |                               |                                 |   |          |             | TAL                          |                               | OR       | TOTAL               |            | 12               |  |
|  |  |   |                                       |                               |                                 |   |          |             | FEE                          |                               | 12       | ADDIT. FEE          | 00-        |                  |  |
| _  |  | (Column 1)<br>CLAIMS                      | r -                                   |                               | HEST                            |   | 7        |             |                              | ADDI-                         |          |                     | ADI        | DI-              |  |
| MENDMENT B   | 4/12/11  | REMAINING<br>AFTER                        |                                       | PREVI                         | MBER<br>HOUSLY<br>FOR           | PRESENT                                       |          | RATE        |                              | TIONAL<br>FEE                 |          | RATE                | TION       |                  |  |
|  | Total  | * 17                                      | Minus                                 | ** O                          | HOR                             | =   |          | X\$ 9       | <del></del> -                | )                             | OR       | X\$18=              | ſ          |                  |  |
|  | Independent                                    | . 7                                       | Minus                                 | ***                           | 7                               |   |          | X43         | l=                           |                               | OR       | X86=                |            |                  |  |
| <u></u>  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                                       |                               |                                 |   | L        | +14         | 5=                           |                               | OR       | +290=               |            |                  |  |
|  |  |   |                                       |                               |                                 |   |          |             |                              |                               | OR       | TOTAL<br>ADDIT. FEI |            |                  |  |
| (Column 1) (Column 2) (Column 3)   |  |   |                                       |                               |                                 |   |          |             |                              |                               |          |                     |            |                  |  |
| AMENDMENT C  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                       | HIG<br>NUM<br>PREV            | HEST<br>MBER<br>IOUSLY<br>D FOR | PRESENT<br>EXTRA                              |          | RAT         | Έ                            | ADDI-<br>TIONAL<br>FEE        |          | RATE                | TIO        | DI-<br>NAL<br>EE |  |
|  | Total  | •   | Minus                                 | **                            |                                 | =   |          | X\$ :       | 9=                           |                               | ОЯ       | X\$18=              |            |                  |  |
|  | Independent                                    | •   | Minus                                 | ###                           |                                 | <u> -                                    </u> | 1        | X43         | }=                           |                               | OF       | X86=                |            |                  |  |
| 5  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                                       |                               |                                 |   |          | +14         | <br>5=                       |                               | OR       |                     |            |                  |  |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT. FEE |  |   |                                       |                               |                                 |   |          |             |                              |                               | ОЯ       | TOTA                | _          |                  |  |
|  | of the Ot link and Mr.                         | mbor Droviousky B                         | aid East IN TH                        | IS SPACE                      | ic loss th                      | ian 3. enter "3.                              | _        | ADDIT.      |                              |                               | <b>J</b> | ADDII. FE           | :          |                  |  |
|  | The "Highest Nun                               | nber Previously Pa                        | o For (Total o                        | r indepen                     | aeúr) iz tu                     | ie nignest num                                | OCI II   | Juliu III U | ·cap                         | proprieto b                   |          |                     |            |                  |  |

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